| | | | Extension (months) one month two months three months four months | oti <u>sm</u> \$ \$ | e for ner than nall entity 110.00 410.00 930.00 ,450.00 | Fee for small entity \$ 55.00 \$205.00 \$465.00 \$725.00 | | | | | |
|-----|--|--|--|------------------------------|---|--|--|--|--|--|--|
| | _ | Attached is a check in the amount of \$ for the three month extension fee as required by 37 C.F.R. § 1.17(c). If an additional extension of time is required, please consider this a petition therefor. | | | | | | | | | |
| | | | | | | | | | | | |
| | (Check and complete the next item, if applicable) | | | | | | | | | | |
| | An extension for months has already been secured and the fee paid thereof of \$ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$ OR | | | | | | | | | | |
| | | | | OI (| | | | | | | |
| (b) | XX | XX Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time. | | | | | | | | | |
| | XX If any additional fee for claims or extension of time is requi charge Account No. 23-3000. A duplicate of this transmit attached. | | | | | | | | | | |
| | | | F | lespe | ctfully subm | itted, | | | | | |
| | | | v | VOOE | , HERRON | & EVANS, L.L.P. | | | | | |
| | | | _ | Bu | uly A | Ph.D. | | | | | |
| | | | В | everi | y A. Lyman, | Ph.D. | | | | | |

441 Vine Street Cincinnati, OH 45202 513-241-2324 513-421-7269 - facsimile

2700 Carew Tower

Page 3 of 3

Reg. No. 41,961



| (Col. 1) Claims Remaining After Amendment | | (Col. 2) Highest No. Previously Paid For | | (Col. 3) | SMALL ENTITY | | LARGE ENTITY | |
|--|---|---|----|-------------|-----------------|-----|-----------------|-------------|
| | | | | Extra | Present Rate | Fee | Present Rate | Fee |
| TOTAL | 15 | MINUS | 22 | = 0 | x \$9 | \$O | x \$18 | \$O |
| INDEP. | 2 | MINUS | 2 | = 0 | x \$42 | \$0 | x \$84 | \$O |
| FIRST PRE | FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | \$Q | + \$270 | \$ 0 |
| TOTALS | | | | | TOTAL FEE | \$O | TOTAL FEE | \$O |

- ☆ If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- ☆☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

| | X No additional fee for claims is required. |
|----|---|
| 4. | Attached is a check in the sum of \$ |
| | Please charge my Deposit Account No. 23-3000 in the amount of \$ A duplicate copy of this sheet is attached. |
| 5. | The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply. |
| | Complete (a) or (b) as applicable. |

(a) ____ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

Certificate of Facsimile

I hereby certify that this correspondence is being deposited via facsimile to The Honorable Commissioner in the United States Patent and Trademark Office, Attention: Dameron L. Jones whose telephone number is (703) 308-4640 and fax number is (703) 872-9306 on October 14,

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Achilefu et al.

Serial No:

10/071,779

Filed:

February 7, 2002

Confirmation No.:

4257

Art Unit:

1616

Examiner: Title:

Jones, Dameron L.

DYE-BIOCONJUGATES FOR SIMULTANEOUS OPTICAL

DIAGNOSTIC AND THERAPEUTIC APPLICATIONS

Atty Docket:

MRD-75

Cincinnati, Ohio 45202

October 14, 2003

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

| i. | Transmitted | herewith i | s an | amendment | for | this | application | ١. |
|----|-------------|------------|------|-----------|-----|------|-------------|----|
|----|-------------|------------|------|-----------|-----|------|-------------|----|

- 2. Small Entity status is claimed.
 - X Other than a Small Entity.
- 3. The fee has been calculated as shown below:

Page 1 of 3

11/13/03

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being deposited via facsimile to The Honorable Commissioner in the United States Patent and Trademark Office, Attention: Dameron L. Jones whose telephone number is (703) 308-4640 and fax number is (703) 872-9306 on October 14, 2003.

Rhonda A. Strange 10/1

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

Achilefu et al.

Serial No.:

10/071,779

Filed:

February 7, 2002

Group Art Unit:

1616

Confirmation No.:

4257

Examiner:

Jones, Dameron L.

Title:

DYE-BIOCONJUGATES FOR SIMULTANEOUS OPTICAL

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Our Ref. No.:

MRD-75

Cincinnati, OH 45202

October 14, 2003

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

<u>AMENDMENT</u>

In response to the Office Action mailed July 14, 2003 in the

above-referenced application, applicants respond as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begin on page 13 of this paper.

Remarks/Arguments begin on page 20 of this paper.